## PLAINTIFF'S MOTION EXHIBIT 33

Page 132 1 VINOD DHAR, M.D. 2 Q. Pursuant to the policy? 3 Substantial risk is to prevent Α. the potential risk. 4 5 Q. My question is if you have a 6 risk, but it's only a potential risk, is 7 that sufficient to qualify as a substantial 8 risk under the policy? 9 Under the policy, yes. 10 So any risk is a substantial 11 risk under the policy? 12 Α. Under the policy for 9.39, yes. 13 0. Why is that? 14 Α. Safety. 15 Q. The safety of whom? 16 Α. The person. 17 What does the term substantial 0. 18 risk mean to you, Doctor? 19 Α. It's a very undefined term that 20 is used by different agencies by different 21 professionals. There's a patient in the 22 nursing home, there is a patient coming from 23 -- patient living in the home by himself, he 24 is -- has no food, has no heat, and if the 25 neighbors complain that he's smelling.

Page 133 1 VINOD DHAR, M.D. 2 somebody will go there and make an assessment and if what they find there is 3 4 potentially a dangerous situation, they will 5 remove the patient and bring to the 6 emergency room. So there is a substantial, as well as, potential. 7 Isn't there a difference in your 8 mind between any risk and substantial risk? 9 MR. RADOMISLI: I'm going to 10 11 object to the extent you're asking for his mind. If you want to ask whether 12 13 it's a policy --MR. SMITH: Okay. Fine. I will 14 15 ask what the policy is and see if he 16 thinks there's any distinction either 17 because we are mincing words here. Under the Jamaica Hospital 18 19 policy, is there any difference between a 20 potential or any potential risk of dangerousness and a substantial risk of 21 22 dangerousness? 23 Again, it's a clinical judgment. I don't think it's defined in the policy. 24 25 In your opinion, is there a Q.

	Page 134
1	VINOD DHAR, M.D.
2	difference between any potential risk and a
3	substantial risk of dangerousness?
4	MR. RADOMISLI: He is here as a
5	30(b)(6) witness.
6	Q. Okay. You can answer the
7	question.
8	MR. RADOMISLI: No, he can't.
9	MR. SMITH: You're instructing
10	him not to answer that question?
11	MR. RADOMISLI: It's not proper
12	of a 30(b)(6) witness. You know that.
13	MR. SMITH: No, I don't.
14	MR. RADOMISLI: I cited a case.
15	Don't answer that question. It's not
16	proper.
17	Q. Does the term substantial risk,
18	as defined in the Jamaica Hospital policy,
19	include any risk of harm?
20	A. Yes.
21	Q. So under Jamaica's policy, any
22	possible risk is a sufficient basis in which
23	to involuntary admit somebody, because of
24	the conclusion that they are dangerous to
25	themselves or others; is that correct?

	Page 135
1	VINOD DHAR, M.D.
2	MR. RADOMISLI: Objection to the
3	form.
4	A. Yes.
5	Q. Is part of Jamaica's policy in
6	making this assessment about risk of
7	dangerousness to seek out to protect the
8	community, as well as, the patient?
9	A. Both.
10	Q. I'm sorry?
11	A. Both patient, as well as, the
12	community.
13	Q. Why is the hospital involved in
14	seeking out to make the community safe?
15	MR. RADOMISLI: Objection to
16	form.
17	A. Because article 9.39 is safety
18	for patient and others.
19	Q. So Jamaica Hospital views one of
20	its roles under 9.39 is to make the
21	community safe?
22	MR. RADOMISLI: Objection to
23	form.
24	A. I don't think it's question of
25	making the community safe. It's making